City of Portland, Maine - Bui	ilding or Use	Permit Applica	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel:	6, Fax: (207) 874-8	8716	2014-00863		016 H003001	
Location of Construction:		Owner Address:		•	Phone:	
52 MONUMENT ST BALZANO-L JOANNE & D		DIANNE VA 2		S MONROE S 22204	T ARLINGTO	ON,
Business Name:  Contractor Name  Jims Plumbing  jim@jims-ph.				actor Address:	Phone	
		C		amb Rd Westbr	2 (207) 854-8068	
Lessee/Buyer's Name Phone:			Permit Type: HVAC		Zone:	
						R6
Past Use: Proposed Use:		Pe		mit Fee: Cost of Work:		CEO District:
Three family (under construction alterations)  Same: Three f		amily INSPEC		\$270.00 ECTION:	T .	
Proposed Project Description: HVAC; Install Pensotti PCI 18/8						
HVAC, Ilistan Felisotti FCI 18/8		PEDE	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: Approved Approved w/Conditions Denied				
			Si	gnature:		Date:
·	pplied For: 28/2014			Zoning	g Approval	
This permit application does not preclude the		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.				☐ Varianc	e	Not in District or Landman
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work</li> </ol>		Wetland		Miscell	aneous	Does Not Require Review
		Flood Zone		Condition	onal Use	Requires Review
		Subdivision		Interpre	tation	Approved
	Site Plan		Approv	ed	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
	Date:		Date:		Date:	
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit to shall have the authority to enter all an acceptance in the same in t	to make this appl for work describe	lication as his authord in the application	nat the orized a is issu	proposed work gent and I agree ed, I certify that	to conform to	all applicable laws of this ial's authorized representative
such permit.						

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE